

RURAL DISTRICT COUNCIL.
OF OAKHAM.



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH,
FOR THE YEAR 1904.

OAKHAM:
CHAS. MATKIN, PRINTER AND STATIONER, HIGH STREET.



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REPORT.

WHITE LODGE,
KIRBY MUXLOE,
LEICESTER,
1st March, 1905.

TO THE CHAIRMAN AND MEMBERS OF THE OAKHAM
RURAL DISTRICT COUNCIL.

GENTLEMEN,

I have the pleasure to present my third Annual Report on the Health and Sanitation of your District.

VITAL STATISTICS.

Population :—Census, 1891	10,486
Census, 1901	10,064
Estimated to middle of 1903..	9,935

During the year, 231 births and 133 deaths have been registered in the District. There were in addition, three deaths in the Stamford Infirmary among persons respectively belonging to Oakham, Greetham and Langham. One death in the Union Workhouse is accredited to the Melton Mowbray Rural District. The number of deaths as to which the corrected death rate is estimated is thus, 135.

The Birth Rate is	23.2 per 1000 of the population.
The Death Rate is	13.6 „ „ „
The Zymotic Death Rate is 0.7	„ „ „
The Infant Mortality Rate is 112	„ Births.

The Birth and Death Rates are both below the average for your District, and considerably below the mean for Rural England and Wales.

There were 26 deaths in Infants under one year, and 60 in persons of sixty-five years and upwards. The corrected death rate for the town of Oakham is 16.4. For the remainder of the District it is 12.1. The "natural increase" in the population, i.e., the excess in the number of births over deaths is 96.

DEATHS FROM ZYMOTIC DISEASE.

The following deaths were registered :—

Scarlet Fever	..	..	..	..	1
Whooping Cough	..	..	..	..	1
Enteric Fever	..	..	..	..	2
Diarrhœa	..	..	..	..	3
					7

There was in addition one death from Erysipelas. I also record two deaths from Enteritis in Infants, which may have been Zymotic.

DEATHS FROM TUBERCULOSIS.

Eleven fatal cases are recorded, eight of which were caused by Consumption. I have in previous reports directed attention to the advisability of making Consumption voluntarily notifiable and can only reiterate my previous advice.

OTHER CAUSES OF DEATH.

Bronchitis, Pneumonia and other respiratory diseases are jointly accountable for sixteen deaths. Eight deaths were caused by Cancer and twenty by diseases of the heart. There were seven deaths among premature and imperfectly developed infants. Four fatal accidents are recorded. Three deaths were suicidal and two are attributed to alcohol.

NOTIFICATION OF INFECTIOUS DISEASE.

The following notifications were received during the year:—

Small-pox	..	..	..	..	..	1
Diphtheria	..	..	..	..	..	1
Erysipelas	..	..	..	..	..	8
Scarlet Fever	..	..	..	..	..	34
Enteric Fever	..	..	..	..	..	3
Puerperal Fever	..	..	..	..	..	1
Chicken-pox	..	..	..	..	..	67
						115

Sixty per cent. of the cases occurred in the town of Oakham.

SMALL-POX AND CHICKEN-POX.

One case of Small-pox at Empingham, the infection of which was presumably imported by a tramp, was specially reported upon at the time of its occurrence. In rural districts enjoying a high degree of immunity from conscientious objectors, there is but little difficulty in treating cases in their own homes. In fact when people in the vicinity are guided by the advice of experts there is no disease more easy to administer. Such was the case in Empingham. There was no hospital isolation and no spread of the disease. If the population of England were as well vaccinated as are members of my own profession, hospitals for the isolation of Small-pox would be superfluous.

Sixty-seven cases of Chicken-pox were notified, the cases being distributed in ten parishes and most prevalent in Cottesmore and Oakham. There were doubtless many unnotified cases, several of which I detected in course of house to house inspections. In approximately five separate instances the notification of this disease in other districts for which I am Health Officer has during the past two years led to my locating cases of Small-pox which might otherwise have passed unnoticed.

DIPHTHERIA.

One case was notified in Oakham. The remainder of the District appears to have enjoyed immunity from this disease.

SCARLET FEVER.

This disease prevailed in Oakham where 33 cases were reported, there being one case in the adjoining parish of Barleythorpe. There were two cases in April, nine in May, nine in June, and two in July. The majority of the patients were sent to the Isolation Hospital, and no further cases were notified until the return from the hospital of several cases in the month of September was the signal for its recrudescence. "Return Cases" were notified in three separate houses, twelve cases in all being reported within three months. At Stamford Infirmary these later cases were attributed, firstly, to inefficient disinfection after the patient's removal to hospital, and, secondly, to the probable occurrence of unascertained cases. Disinfection in your District can never be considered adequate unless you are prepared to supply a steam disinfectant in addition to the formalin spraying and fumigation already employed, and it is for this reason that I have long since advised the purchase of a disinfecting machine in which formalin is employed in conjunction with current steam, at a cost of £25. At the Stamford Infirmary, hot air is used for the disinfection of patients' clothing prior to discharge. Although disinfection is probably secured by this means it is far from ideal.

As a matter of fact Return Cases are an inevitable attribute of the present custom of aggregating Scarlet Fever patients in the wards of Isolation Hospitals, and all available precautions have so far signally failed to eliminate them. I am already only too familiar with them in other Districts where steam disinfection is efficiently employed. They are essentially a hospital phenomenon. We rarely, if ever, meet their counterpart in connection with cases treated at home, however perfunctory may be the system of disinfection.

They are admittedly attributable in an overwhelming majority of instances to infection stored up in the patients' system and liberated after discharge from hospital. And it is further significant that return cases are as a rule more severe than the infecting cases which cause them.

To contend that the recrudescence of Scarlet Fever in Oakham was attributable to infection from unnotified patients is to concede that the disease was spread by a class of cases which are rarely isolated either at home or in hospital. Some of the later cases very probably did arise in this manner, but others were typical return cases. Apart from return cases it is only too true that Scarlet Fever is ordinarily spread by unnotified cases usually of so trivial and transitory a type as to evade recognition. These cases, I have sound reason for stating, are far more common than is generally supposed. One of them can do more mischief than half a dozen notified cases whether the latter go to hospital or not. It is largely for this reason that the hospital isolation of Scarlet Fever has signally failed to accomplish the results so confidently expected by its earlier apologists. To be really efficient it involves, in my opinion, a separate ward for each patient and some method, at present impossible, of locating and isolating the unnotified case. I am a strenuous and consistent advocate of the hospital isolation of other infectious diseases in which this preventive measure is ordinarily employed; but even then the necessity for recourse to it is usually an indication of inefficacy in our first line of defence, sound sanitation. I cannot, however, consistently counsel systematic expenditure on a measure which has far too frequently served to increase the prevalence of Scarlet Fever in localities for which I am Health Officer. Moreover, with the most perfect system of isolation our efforts are in large measure thwarted by the communication of infection prior to removal of the patient. For I am convinced that the disease is most infectious at its outset, when the rash is making its appearance. There are, however,

certain cases in which removal of the patient from his surroundings, tardy though it be, is practically imperative. Notably is this the case in farmhouses from which milk is supplied. But here also it is the unnotified case which almost invariably does the mischief. My opinion in short with regard to the hospital isolation of Scarlet Fever—or more properly of the type of Scarlet Fever prevailing within recent years—is that the indiscriminate despatch of every case to the Isolation Hospital is both a sanitary and an economic error. The cases suitable for hospital isolation are relatively few and should be carefully selected.

The suggestion that the Oakham return cases were due to carelessness or want of reasonable diligence at Stamford Infirmary is based on an absolute misconception as to their nature and origin. The infecting cases were detained in hospital as long as was necessary*, and I know that the bathing-out and discharge of patients is as careful and efficient as can be reasonably expected. The best administered hospitals have every year to confess to some five per cent. (their actual number is far more) of such cases, despite the most elaborate precautions and most skilled medical inspection. The truth is that the infection sent home from hospital is not on the patient. It is in him. And it is therefore that I ask you to issue the following instructions which I have long since used in respect of patients discharged from other hospitals.

OAKHAM RURAL DISTRICT.

SCARLET FEVER.

PRECAUTIONS TO BE OBSERVED FOR ONE MONTH AFTER DISCHARGE FROM THE ISOLATION HOSPITAL :—

- (1) The Patient should occupy a separate bedroom, or, if a child, should not be allowed to sleep with other children.

*Prolonged detention in Hospital appears in many instances to increase rather than diminish the probability of return cases.

- (2) All glasses, cups, spoons, &c., used by the patient should be placed in BOILING water for five minutes before being used by other persons.
- (3) Instead of Pocket Handkerchiefs, pieces of rag should be used and at once burnt.
- (4) Parents are warned that children recently discharged from hospital may convey infection to other members of the household by kissing.
- (5) Visitors, especially children, should not be admitted to the house, and the patient should not visit other houses for at least a month.
- (6) No child discharged from the Isolation Hospital should attend any School, Sunday School, Church, Chapel, or other place of public meeting for one month.

Should any discharge from the ear or nostrils or swelling of the throat be observed, the above precautions should be redoubled and medical advice obtained.

J. E. O'CONNOR,

Medical Officer of Health.

ENTERIC FEVER.

I record three sporadic cases. One, in Market Overton, was imported. The other two, one of which proved fatal, and which properly led to very thorough sanitary alterations, occurred in the town of Oakham.

SANITATION OF THE DISTRICT.

The Sanitary Inspector's statistical synopses are appended.

I regretfully state that the advice embodied in my last two Annual Reports as to rectification of rivers pollution, and as to the necessity for abolishing insanitary pits has not led to any appreciable improvement. In one instance, while advising as to the most suitable means of purifying a drainage effluent from a country residence I was courteously

reminded that the sewage effluent of an adjacent village was permitted to pollute the brook with impunity ! I could have added that the same might consistently be said of almost every village in the county.

I have to advert to my reiterated advice as to nuisances caused by pig-keeping in the town of Oakham. And it is also my duty to direct attention to the fact that although Oakham possesses an excellent public water-supply, a large number of houses obtain their drinking water from more or less polluted wells.

FACTORY AND WORKSHOP ACT.

A statistical summary is appended on a form supplied for the purpose by the Home Office. Bakehouses are regularly inspected and limewashing ordered when necessary. They are, on the whole, kept satisfactorily, as are also the few other workshops in your District.

The Tables dealing with Vital Statistics, Sickness and Mortality, required by the Local Government Board, are subjoined.

I have the honour to be, Gentlemen,

Your obedient Servant,

J. E. O'CONNOR, CAPT.,

*Medical Officer of Health, Leicestershire, Rutland and
Warwick Combined Sanitary Districts.*

SANITARY INSPECTOR'S REPORT.

OAKHAM TOWN DISTRICT.

Complaints	No. received	65
Premises, houses, etc.	No. inspected	35
	Nuisances abated	30
Pool, ditch, gutter, watercourse	No. inspected	3
	Nuisances abated	2
Animals improperly kept	No. inspected	10
Privy, urinal, cesspool, ashpit	No. inspected	8
	Nuisances abated	8
Drain, drain-traps, etc., etc.	No. inspected	22
	Nuisances abated	20
House, or part thereof, over-crowded	No. inspected	1
	Nuisances abated	1
Offensive accumulations	No. inspected	10
	Nuisances abated	9
Other insanitary conditions	No. inspected	7
	Nuisances abated	7
Lodging houses	No. registered	1
	No. of inspections	3
Slaughter houses	No. licensed or registered	10
	No. of inspections	10
Dairymen, cowkeepers, purveyors of milk	No. registered	3
	No. in District	3
	No. of inspections of premises	3
Food—unwholesome	No. of seizures	1
Infectious diseases	Houses affected with	29
	Houses inspected	29
	No. of inspections	29
	Houses disinfected	29
	Schools disinfected	2
	Disinfectant used—Formalin for fumigating and spraying, Izal and Sanitas soap	
	Lots of clothing disinfected	29
	Lots of clothing destroyed	1
Privy middens	Abolished.	
Pail or earth closets	No. converted to w.c's.	2
Water closets	No. supplied with water	2
Ashbins	New provided	2
Water supply	Samples taken for analysis	3
	Samples condemned	3
	Wells closed	2
	Public supply substituted for wells	10
	Cisterns cleansed, repaired, and covered	2

Building Bye-laws adopted in year 1889.

W. SWIFT,

SANITARY INSPECTOR.

REMOVAL OF CLOSET TUBS AND HOUSE REFUSE.—This work has been performed during the year in a satisfactory manner by the Council's men and horses, and with very few complaints. Although a large quantity of broken pots, old tins, and other hard refuse is kept separate and carted to the brickyard, there is some difficulty in finding purchasers for the Organic Manure. A large amount of labour would be saved, and it would be of the greatest advantage from a sanitary point of view, especially in cramped situations, if water closets were generally adopted in the town, a public supply of water being now available.

ASHBINS.—These are not provided to some of the new houses, and the refuse is put into small boxes which are inadequate for a few days' accumulation, and give rise to insanitary conditions.

WATER SUPPLY.—Very slow progress is being made in laying on good drinking water to the houses. Three samples from wells have been condemned, two after typhoid, and in the latter two cases the public supply has been utilized.

NEW BRANCH SEWER.—The new branch sewer on the Ashwell Road has been completed, and the Union Workhouse drains, and the drains from other properties near, connected therewith.

SCARLET FEVER.—An outbreak of Scarlet Fever commenced in April, and in three families the disease recurred after the return of patients from Stamford Isolation Hospital. The outbreak lingered on until November, and caused much extra work, 29 houses having to be disinfected and cleansed. The Public Elementary Schools were also sprayed and cleansed, the Infant portion being twice done.

OAKHAM RURAL DISTRICT

(EXCLUSIVE OF OAKHAM TOWN).

Complaints	..	..	..	No. received	..	..	..	41
Premises, houses, etc.	..	..	..	No. inspected	..	..	..	41
				Nuisances abated	..	..	..	41
Animals improperly kept	..	..	..	No. inspected	..	..	..	14
				Nuisances abated	..	..	..	14
Privy, urinal, cesspool, ashpit	..	..	..	No. inspected	..	..	..	15
				Nuisances abated	..	..	..	15
Drain, drain-traps. etc., etc.	..	..	..	No. inspected	..	..	..	4
				Nuisances abated	..	..	..	4
House, or part thereof, over-				No. inspected	..	..	..	2
crowded				Nuisances abated	..	..	..	2

Offensive accumulations	..	No. inspected	..	..	10
		Nuisances abated	..	..	8
Slaughter houses	..	No. of inspections	..	..	15
Dairymen, cowkeepers, purveyors	..	No. in district	..	..	8
of milk		No. of inspections of premises	..	..	8
Infectious diseases	..	Houses affected with	..	..	2
		Houses inspected	..	..	2
		No. of inspections	..	..	2
		Houses disinfected	..	..	2
		Schools disinfected	..	..	1
		Disinfectant used	Izal and formalin		
		Lots of clothing destroyed	..	..	1
Privy middens	..	No. converted to pails	..	..	8
Ashpits	..	New provided	..	..	8
Water supply	..	Wells cleansed, repaired, etc.	..	..	2

JAMES ALDERWOOD,

SANITARY INSPECTOR.

TABLE I.—Giving the Number of Births and Deaths during the Years 1895 to 1904.

OAKHAM RURAL DISTRICT.

YEAR.	Population estimated to Middle of each Year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		DEATHS IN PUBLIC INSTITUTIONS.	Deaths of Non-residents registered in District.	Deaths of Residents registered beyond District.	DEATHS AT ALL AGES. NET.	
		Number.	Rate per 1000 of estimated population	Number.	Rate per 1000 Births registered.	Number.	Rate per 1000 of estimated population				Number.	Rate per 1000 of estimated population
1894	10,350	268	...	35	...	136	...	7	...	...	...	...
1895	..	284	...	36	...	150	...	8	...	...	...	...
1896	...	256	...	24	...	139	...	5	...	...	...	...
1897	...	278	...	20	...	133	...	6	...	...	...	...
1898	...	236	...	38	...	178	...	5	...	...	...	...
1899	..	262	...	29	...	157	...	14	...	...	...	...
1900	...	243	...	17	...	127	...	14	2	...	...	...
1901	...	269	...	25	...	163	...	11	...	...	...	...
1902	10,010	233	23.2	18	77	134	13.3	7	...	...	...	...
1903	9,975	225	22.5	24	106	117	11.7	6	1	..	116	11.6
Averages for years 1894-1903	10,169	255	25.0	26	102	143	14.0	...	...	...	...	...
1904	9,935	231	23.2	26	112	133	13.4	7	1	3	135	13.6

Area of District in Acres (exclusive of area covered by water)

...

...

...

54,709

...

...

10,064

...

...

2,305

...

4.3

At Census of 1901

Institutions within the District receiving sick and infirm persons from outside the District—The Union Workhouse, Oakham.
 Institutions outside the District receiving sick and infirm persons from the District—The Stamford Infirmary.
 The Union Workhouse is within the District.

TABLE II.—Showing Population to middle of each year, No. of Births registered, and No. of Deaths in the Oakham Rural District, during the years 1894 to 1904 inclusive.

Year.	Population.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
	Oakham Town.				Remainder of District.			
1894 ...	3317	92	31	12	7033	176	105	23
1895 ...	...	83	42	12	...	201	108	24
1896 ...	...	88	50	8	...	168	89	16
1897 ...	...	93	40	16	...	185	93	4
1898 ...	...	66	72	14	...	170	106	24
1899 ...	...	94	62	17	...	178	95	12
1900 ...	...	84	39	6	...	159	88	11
1901 ...	...	89	51	7	...	180	112	18
1902 ...	...	78	47	4	...	155	57	14
1903 ...	3287	77	38	10	6688	148	78	14
Averages } 1894 to 1903 ... }	3302	...	...	...	6860	...	..	...
1904 ...	3284	89	54	9	6651	142	81	17

TABLE III.—Shewing Cases of Infectious Disease notified during the Year 1904.

OAKHAM RURAL DISTRICT.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CLASSES NOTIFIED IN EACH LOCALITY.													CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.		
	At all ages.	Under 1 year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 65 years.	65 years and upwards.	Ashwell.	Barleythorpe.	Barrow.	Braunston.	Cottesmore.	Empingham.	Exton.	Greetham.	Hambleton.	Langham.	Manton.	Market Overton.	Oakham.	Thistleton.	Barleythorpe.	Oakham.
Small Pox	1	..	..	..	..	1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..
Membranous Croup	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas	8	..	1	..	1	5	1	1	..	1	1	..	1	..	1	..	..	..	..	2	1	..	..
Scarlet Fever ...	34	..	5	27	2	..	..	..	1	..	..	..	..	..	..	..	..	..	..	33	..	1	19
Typhus Fever ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever ...	3	..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	2	..	..	..
Relapsing Fever ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever ...	1	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken Pox ...	67	8	34	23	2	..	..	3	..	5	..	17	..	1	..	1	3	1	3	27	6	..	..
Totals	115	8	41	51	6	8	1	5	1	6	1	17	2	1	1	1	3	1	4	65	7	1	19

Isolation Hospital, Stamford Infirmary.

TABLE IV.—Showing Causes of, and Ages at, Death during the Year 1904.

OAKHAM RURAL DISTRICT.

CAUSES OF DEATH.	Deaths in or belonging to whole District at subjoined Ages.							Deaths in or belonging to Localities at all Ages.																	Deaths in Public Institutions in the District.						
	All Ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Ashwell.	Barrow.	Braunston.	Burley.	Cottesmore.	Edith Weston.	Empingham.	Exton.	Greetham.	Hambleton.	Langham.	Leighfield.	Manton.	Market Overton.	Oakham.	Stretton.	Teigh.	Thistleton.	Tickencote.	Whissendine.	Whitwell.	Belonging to the District.	Not belonging to the District.	Total.
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever	I	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..
Whooping Cough	I	I	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria and Mem- branous Croup	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Croup	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever	2	..	I	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	I	I	..	..	..	..	..	..	..	..	..
Continued Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Epidemic Influenza	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhœa	3	2	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	I	I	..	I	..	..	..	..	..	..	..
Enteritis	2	2	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..
Puerperal Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas	I	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Septic Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Phthisis	8	..	..	..	2	6	..	..	..	..	..	..	..	I	..	I	I	I	..	..	..	4	..	..	..	..	..	..	I	..	I
Other Tubercular Diseases	3	..	2	I	..	..	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..
Cancer, malignant disease	8	..	..	..	..	3	5	..	..	I	..	..	..	..	I	..	..	..	..	..	..	5	I	..	..	..	..	..	..	..	..
Bronchitis	10	6	..	..	..	I	3	..	I	..	I	2	..	..	..	..	..	..	..	..	..	4	..	..	..	I	I	..	..	..	..
Pneumonia	4	2	..	..	..	I	I	..	..	..	..	..	..	..	..	..	..	I	..	..	..	I	..	..	..	..	2	..	..	..	..
Pleurisy	I	I	..	..	..	..	..	..	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Diseases of Res- piratory Organs	I	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism, Cirrhosis of Liver	2	..	..	..	..	2	..	..	..	I	..	..	..	..	I	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Venereal Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Premature Birth	7	7	..	..	..	..	..	..	I	..	..	..	..	..	2	3	..	..	..	..	..	I	..	..	..	..	..	..	..	..	..
Diseases and Accidents of Parturition	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Heart Diseases	20	..	I	..	2	6	11	I	..	I	I	I	I	2	I	..	..	2	I	..	..	7	..	..	..	..	I	I	I	..	I
Accidents	4	..	I	..	..	I	2	..	..	..	..	I	..	..	..	..	..	I	..	..	2	..	..	..	..	..	..	..	..	..	..
Suicides	3	..	..	..	..	2	I	..	..	..	I	..	..	..	..	..	..	I	..	..	..	I	..	..	..	..	..	..	I	..	I
All other causes	54	5	I	..	I	12	35	2	..	I	I	5	I	I	..	I	2	6	..	I	..	23	..	I	I	2	5	I	3	I	4
All causes	135	26	6	2	5	36	60	3	3	4	4	9	3	6	5	6	3	13	I	I	2	54	I	2	I	3	9	2	6	I	7

**RURAL DISTRICT OF OAKHAM.
Factories, Workshops, Laundries, Workplaces and Homework.**

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	8	Nil	Nil
Workshops (including Workshop Laundries) ..	45	Nil	Nil
Workplaces	30	Nil	Nil
Homeworkers' Premises	2	Nil	Nil
Total	85	Nil	Nil

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
Nuisances under the Public Health Acts :—				
Want of cleanliness	8	8	...	...
Want of Ventilation	1	1	...	...
Overcrowding	1	1	...	...
Want of drainage of floors	...	...	...	...
Other nuisances	2	1	...	...
+Sanitary accommodations { insufficient	1	1	...	...
{ unsuitable or defective	..	...	...	...
{ not separate for sexes	...	...	...	...
Offences under the Factory and Workshop Act :—				
Illegal occupation of underground bakehouse (S. 101) ...	...	...	...	...
Breach of special sanitary requirements for bakehouses (SS. 97 to 100).	...	...	...	...
Failure as regard lists of outworkers (S. 107)	...	...	...	...
Giving out work to be done in { unwholesome (S. 108)	...	...	...	...
{ infected (S. 110)	...	...	...	...
Allowing wearing apparel to be made in premises infected by scarlet fever or smallpox (S. 109).	...	...	...	...
Other offences	...	...	...	...
Total	13	12	...	...

+ Section 22 of the Public Health Acts Amendment Act,1890, has been adopted.

3.—OTHER MATTERS.

Class.	Number.	
Matters notified to H. M. Inspectors of Factories :—		Nil
Failure to affix Abstract of the Factory and Workshop Act (S. 133) ..	...	...
Action taken in matters referred by H. M. Inspectors { Notified by H. M. Inspector	2	2
as remediable under the Public Health Acts, but { Reports (of action taken) sent to H. M. Inspectors.	2	2
Other	Nil	Nil
Underground Bakehouses (S. 101) :—		
In use during 1903	Nil	Nil
Certificates granted { in 1903	Nil	Nil
{ in 1904	Nil	Nil
In use at the end of 1904	...	...
Homework :—		
Lists of Outworkers (S. 107) :—		
Lists received	1	2
Addresses of Outworkers { forwarded to other Authorities	Nil	Nil
{ received from other Authorities	Nil	Nil
Homework in unwholesome or infected premises :—		
Notices prohibiting homework in unwholesome premises (S. 108) ..	2	...
Cases of infectious disease notified in homeworkers' premises ...	2	...
Orders prohibiting homework in infected premises (S. 110)	2	...
Workshops on the Register (S. 131) at the end of 1904 :—		
Bakehouses	19	
Total number of Workshops on Register	33	

Wearing Apparel.	Other.
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